

Is CMS aware that Kaiser is pulling out of Teller, Fremont and Park counties with its Medicare coverage?

Yes, CMS was made aware of Kaiser's business decision to reduce their service area in Fremont, Park, and Teller counties in May 2019. Every year, CMS allows plans to submit Non-Renewal or Service Area Reduction requests, effective for January of the following year. Kaiser submitted this request in a timely manner. CMS requires Plans that non-renew or reduce their service areas to communicate this information to their enrollees to ensure they can make an informed decision during Open Enrollment.

What are the rules regarding this type of decision? Or is it at the discretion of the company? On an annual basis, MA and Medicare Prescription Drug (PDP) plans make business decisions to offer health and or drug plan coverage in a particular service area or state. Those decisions include the choice to renew current product offerings, change product offerings, expand service areas, reduce service areas, or non-renew their contracts with the Centers for Medicare & Medicaid Services (CMS).

What options do those affected have? See our attached [model notices] which provides complete details regarding timelines, options and choices, and consumer protections available to everyone impacted by the non-renewals. Kaiser was required to send this letter out by October 2, 2020, to everyone impacted by their decision to non-renew in Fremont, Park & Teller Counties. Additionally, CMS mails a Non-Renewal Action Notice, Product No. 11452, to Medicare beneficiaries in January that do not enroll in (choose) a new plan to start January 1, 2020. The notice reminds them that they have a Special Enrollment Period ending February 29, 2020 to join a plan.

So that you are aware, in Fremont County, besides Original Medicare, 4 MA Organizations are available offering 17 plan choices with or with drug coverage, and 9 PDP plans are available offering 26 plan choices; in Park County, besides Original Medicare, 2 MA Organizations are available offering 11 plan choices with or with drug coverage, and 9 PDP plans are available offering 26 plan choices; and, in Teller County, besides Original Medicare, 4 MA Organizations are available offering 21 plan choices with or with drug coverage, and 9 PDP plans are available offering 26 plan choices. People impacted do have many options and choices for 2020.

Can or is the office of CMS assisting those affected? Yes, please see above (individual communication with everyone impacted, and through our national customer service call center (1-800-Medicare), or through local assistance provided by State Health Insurance Assistance

Program (SHIP) counselors, or individual customer service and assistance provided by staff here at the CMS Denver Office).

Will those affected lose their primary care doctor and specialists? It depends on what coverage options people select for their 2020 coverage. Additionally, according to Kaiser, the majority of Kaiser

Permanente providers in Fremont and Teller counties are contracted affiliated providers (i.e. not associated with Colorado Permanente Medical Group), who likely accept Original Medicare and may also be contracted with other MA plans in the area. Accordingly, a beneficiary's ability to continue receiving care from these providers depends on whether the provider accepts Medicare Fee For Service patients and/or whether they are contracted with other MA plans into which beneficiaries may choose to enroll.

If so is there a way to retain those physicians? We understand for many people the importance of the provider/patient relationship. Again, it depends on the plan choice selected and it would be very important for people to communicate with their healthcare providers & pharmacists the desire to maintain their personal relationships established if possible, and select Medicare plan options that allow them to do this.

I believe the deadline for these people (approximately 1500 people) to find new coverage is December 31st. Is that correct? To assure people have prescription drug coverage effective 1/1/2020, that is correct. However, again please refer to the attached letters regarding full timelines/ protections people impacted have to make health/drug coverage decisions for 2020 (i.e., they have a special opportunity to join a new plan any time until February 29, 2020).

Please let us know if you have any further questions.

Thank you,

Greg Myers, Press Officer

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